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7	UNITED STATES DISTRICT COURT	
8	WESTERN DISTRICT OF WASHINGTON AT SEATTLE	
9	STATE OF WASHINGTON, et al.,	NO.
10	Plaintiffs,	DECLARATION OF
11	V.	ZACK BARNETT-KERN, LICSW, MSW
12	DONALD J. TRUMP, in his official	
13	DONALD J. TRUMP, in his official capacity as President of the United States of America, et al.,	
14	Defendants.	
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DECLARATION OF ZACK BARNETT-KERN, LICSW, MSW

- I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.
- I am a transman and identify as queer; my pronouns are he/him. I live in Seattle, Washington.
- 3. I am a Licensed Independent Clinical Social Worker Associate (LICSWA) licensed by the Washington State Department of Health. I earned a Bachelor of Arts in Psychology from Western Oregon University in 2017, and a Master of Social Work from the University of Washington in 2023. I have specialized training to diagnosis for gender dysphoria. I am certified in Mental Health First Aid and Communicating Through Conflict. In my role, I use various therapeutic methods depending on the individual to provide support to adolescents (age 13 and older) and adults to achieve their mental health goals. I provide gender-affirming care, including diagnosing gender dysphoria, writing letters of support, and refer clients to specialists in gender-affirming medical care. I also provided family-based counseling in the past.
- 4. I've been a therapist on staff at an all-queer clinic since 2023. Before earning a Masters degree, I was a Court Appointed Special Advocate (CASA) for children in Polk County, Oregon from 2016-2022. In this role, I advocated for a transgender youth who was in the foster care system. Previously, CASA volunteers had refused to work with the transgender youth based on his identity.
- 5. In my current practice I have clients who are transgender youth ages 13-19. I also work with transgender adults. Based on my clinical experience I can attest that gender-affirming care is absolutely vital.
- 6. The gender-affirming care I provide is a place to listen, express feelings, and provide a space to be seen and feel supported. We talk about identity and explore what this means. We talk about what makes us who we are. I want the children I see to feel supported. It is beyond our biology it is about who we are as people. I provide care that helps them feel

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comfortable with who they are as a person and know that it is ok to express their identity and not feel like they need to fit into a box. I provide compassion for their situation.

- 7. My work is informed by the statistics on suicide for unsupported youth. Having a supportive environment can literally be the difference between life and death. Being in a supportive environment can provide a huge amount of relief for these teens. Gender-affirming care shows kids that we want them here, and they come to know that they are wanted.
- 8. Many of my trans patients came to me because I am a trans therapist. Being a transman myself I can relate to patients in a way that others cannot.
- 9. A big part of my practice is exploring differential diagnoses. I do not lean into one diagnosis over another. Being depressed does not mean you are trans. We explore all aspects of the individual's mental health.
- 10. In situations where a patient decides to pursue medical gender-affirming care, I connect them to either Seattle Children's or Mary Bridge. Both of these clinics provide support to teens which include working with the teen and their parents and involve appointments with social workers, doctors, and psychologists.
- 11. Decisions to pursue gender-affirming medical care is client-informed. In therapy, we talk about how they feel emotionally about medical care and then check with the doctors, making sure medical treatment is appropriate.
- 12. In my teen patient population, I have seen patients who receive gender-affirming care go from actively suicidal to wanting to live. I have seen the overall wellbeing of patients drastically improve.
- 13. In the teen population the gender-affirming care they receive is reversable and they can choose to stop at any time. In fact, many teen patients are only receiving puberty blockers and the whole point of puberty blockers it to allow time for the child, doctor and parents to make an informed decision before starting hormone replacement therapy.

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- 14. In my practice I have not encountered any patients who have expressed regrets after starting gender-affirming medical care. Research shows that the rate of detransition is very low and it is very uncommon. In working with adult trans patients I have often heard from adults that the only regret they had was not deciding to get gender-affirming medical care sooner. They regret not acting sooner once they realize the life they could have been living.
- 15. The President's Executive Order issued in late January 2025 has kids terrified to exist, thinking they shouldn't be here. Kids cannot thrive when the world is telling them they shouldn't exist.
- 16. The President's Executive Order, if implemented, will negatively impact my practice. Children could face losing insurance coverage for vital services and be unable to access this care.
- 17. Although this Executive Order focuses on children, I am concerned that adult trans care will be next. I work at a facility with queer in the name. If they criminalize offering gender-affirming care, our practice will not stop providing this essential care. All of the care providers at my facility could face criminal prosecution. I worry about increased harassment against myself and my patients. But, my biggest concern is that this Executive Order will literally result in death. We have to protect our kids.

I declare under penalty of perjury under the laws of the State of Washington and the United States of America that the foregoing is true and correct.

DATED this 3rd day of February 2025 at Seattle , Washington.

ZACK BARNETT-KERN, LICSW, MSW